DATE	: August 24, 2010	
TO SPE OF SUBJECT	: ART UNIT2111 : Request for Certificate of Corre	ection for Appl. No <u>/10/596744_pat. 7624220</u>
Please resp 7 days.	ond to this request for a ce	ertificate of correction within
FOR IFW FI	LES:	
the IFW app	w the requested changes/ dication image. No new m the claims be changed.	corrections as shown in the COCIN document(s) in atter should be introduced, nor should the scope or
	plete the response (see be nent code COCX.	elow) and forward the completed response to scanning
FOR PAPER	R FILES:	•
Please revie	w the requested changes/	corrections as shown in the attached certificate of (see below) and forward it with the file to:
Rand	icates of Correction Brai olph Square – 9D10-A Location 7580	
		Magdalene Talley
		Certificates of Correction Branch
		571-272-0423
Thank You	For Your Assistance	
The request		lentified correction(s) is hereby:
The request	t for issuing the above-id	lentified correction(s) is hereby: All changes apply.
The request Note your decision	t for issuing the above-id on the appropriate box.	
The request Note your decision	t for issuing the above-id on the appropriate box. Approved	All changes apply.
The request Note your decision	t for issuing the above-id on the appropriate box. Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below.
The request Note your decision	t for issuing the above-id on the appropriate box. Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply.
The request Note your decision	t for issuing the above-id on the appropriate box. Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below.
The request Note your decision	t for issuing the above-id on the appropriate box. Approved Approved in Part Denied	All changes apply. Specify below which changes do not apply. State the reasons for denial below.